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CONFIRMATION NO. 8489

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|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>10/646,467 | <b>FILING OR 371(c) DATE</b><br>08/22/2003<br><b>RULE</b> | <b>CLASS</b><br>438 | <b>GROUP ART UNIT</b><br>2812 | <b>ATTORNEY DOCKET NO.</b><br>006915/P6 |
|------------------------------------|---|---------------------|-------------------------------|---|

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/164,327 06/05/2002 PAT 6,939,434 which is a CIP of 09/636,435  
 08/11/2000 PAT 6,494,986

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 11/14/2003**

|   |                               |                             |                           |                                |
|---|-------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>85 | <b>TOTAL CLAIMS</b><br>85 | <b>INDEPENDENT CLAIMS</b><br>1 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                               |                             |                           |                                |
| Verified and Acknowledged<br>Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>   |                               |                             |                           |                                |

**ADDRESS**

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**TITLE**

Plasma immersion ion implantation process using an inductively coupled plasma source having low dissociation and low minimum plasma voltage

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|------------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>2090 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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